KENTUCKY DIVISION OF FORESTRY FEDERAL EXCESS PERSONAL PROPERTY (FEPP) & FIREFIGHTER PROGRAM (FFP) REQUEST FOR EQUIPMENT

Fire Department:County:		ty:
Address:	City:	Zip:
Contact Name:	Phone:	
Fire Chief:(Print)	Email:	
	Date:	
 Sign and date form, send to lo Regional Forester sign & date Priority: GENERAL DESCRIPTION	-	ded.
1		
2		
3		
4		
5		
	APPROVED	
Regional Forester:	(Signature)	e:
Technical Advisor:	(Signature)	e:

Revised: 4/18/2014